## Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

H0002113

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS 33							_	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		. ⊩	ASIC FEE		OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			3> minus 20=		* 13			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			✓ minus 3 =		* /			X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT							` <b> </b> -		<u></u>		****		
* If	the difference	in column 1 is	ro, ente	r "0" in c	olumn 2		+140=		OR	+280=	_		
CLAIMS AS AMENDED - PART II								ΓΟΤΑ <b>L</b>		OH.	TOTAL	THAN	
	(Column 1) (Column 2) (Column							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
AMENDMENT A	A STATE OF THE STA	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	,	
	Independent	*	Minus	***	F OL 4 IN 4	-		X42=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140= <sub>.</sub>		OR	+280=		
							 45	TOTAL	· · · · · · · · · · · · · · · · · · ·	_ I	TOTAL ADDIT. FEE		
		(Column 1)		(Colur	mn 2)	(Column 3)	- AD	DIT. FEE		,	ADDII. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		-		X42=	,	OR	X84=		
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENI	CLAIM		J	140=		OR	+280=	i ertija	
							L_ 4D	TOTAL DIT. FEE			TOTAL ADDIT. FEE	-	
		(Column 1)		(Colur	nn 2)	(Column 3)		DIT. FEE E			ADDII. FEEI		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDN	Total	*	Minus	**		=	,	<b>K\$</b> 9=		OR	X\$18=		
AME	Independent	*	Minus	***	COL AINA	=		X42=		OR	X84=	,	
	FINO I PRESE	NTATION OF MU	JEHPLE DEF	ENDEN	CLAIM		╵├┐	140=		OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Provingely Boid For" IN THIS SPACE is less than 30 center "20."													
***	If the "Highest Nu	mber Previously Pa mber Previously Pa nber Previously Pai	aid For" IN THI	S SPACE	s less tha	n 3, enter "3."	70	OIT. FEE L in the app	ropriate box	•	ADDIT. FEE I umn 1.		

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